Form Status: Certified and Sent to EPA Validation Status: Passed with Possible Errors

(IMPORTA	NT: Type or print; read instructions before c	ompleting form)				Approval Ex	pires: 03/31/2011			Page 1 of 5	
							TRI Facil	ity ID Number			
EPA				98055THBNG8THAN							
United Sta Environme Agency	ntes ental Protection Section 313 of the last known as Title	ght-to-know Act of 1986, Reauthorization Act.			Toxic Ch	emical, Catego	ory or Generic N	ame			
		Certain	Glycol Ethe	rs							
								DPRIATE STATE OFFICE uctions in Appendix F)			
	tion only applies if you are revising or w		Revisio	on (enter up to two code	e(s))		Wi	thdrawal (ent	ter up to two co	ode(s))	
previous	ly submitted form, otherwise leave blanl	<b>K</b> :		[ ][ ]				[	][ ]		
Important:	See Instructions to determine when "Not Ap	pplicable (NA)" boxes should	be checked	l.	***********			***************************************			
		P	art I. FACIL	ITY IDENTIFICATION INF	ORMA	ATION					
SECTION	1. REPORTING YEAR : 2008	***************************************		***************************************	**********	***************************************	***************************************	***************************************		***************************************	
SECTION	2. TRADE SECRET INFORMATION										
[]	u claiming the toxic chemical identified on pa Yes (Answer question 2.2; Attach substanti X ] NO (Do not answer 2.2; Go to Section 3)	ation forms)		2.2 Is this copy [ ] Sanitized [ ] (Answer only i	Unsar if "YES"	nitized " in 2.1)					
SECTION	3. CERTIFICATION (Important: Read and s	ign after completing all form	sections.)								
I hereby co accurate b	ertify that I have reviewed the attached docu based on reasonable estimates using data av	ments and that, to the best o	of my knowle nis report.	edge and belief, the submi	itted inf	formation is tru	ue and complete and	d that the amo	unts and values	in this report are	
Name and	d official title of owner/operator or senior man	nagement official:			Signatu	ıre:				Date Signed:	
File Cop	y : Do Not Send to EPA										
SECTION	4. FACILITY IDENTIFICATION										
4.1				TRI Facility ID	) Numb	oer	98055TH	BNG8THAN			
	stablishment Name COMMERCIAL AIRPLANE GROUP -	RENTON					ng Address(if different PLANE GROUP -		ress)		
Street 8TH & L	OGAN AVE N			Mailing Address P O BOX 37		IC 67-74					
	<del>//State/Zip Code</del> N / King / WA / 98055			City/State/Zip C SEATTLE		/ 98124220	)7		Country (I	Non-US)	
4.2	This report contains information for : ( Important: check a or b; check c or d if ap	plicable)	a. [	X ] An Entire facility		b. [] Part of	a facility	c. [] A Federa	al facility	d. [ ] GOCO	
4.3	Technical Contact	name	SEAN J	J. CALDWELL		Email Address Telephone Number (inclu SEAN.J.CALDWELL@BOEING.COM 4259652302			er (include area code)		
4.4	Public Contact na	ame	MICHAI	EL L. VERHAAR	- 4.	Email Address Telephone Number (includ MICHAEL.L.VERHAAR@BOEING.COM 4259651567			er (include area code)		
1									*	.00	

Form Approved OMB Number: 2070-0093

4.5	NAICS Code (s) (6 digits)	a. 336411 (Primary)	b.	C.	d.	e.	f.				
4.7	Dun and Bradstreet Number(s) (9 digits)										
a. 009262171											
b.											
SECTION	I 5. PARENT COMPANY INFORMATION										
5.1	Name of Parent Company	NA [ ]	THE BO	EING CO							
5.2	Parent Company's Dun & Bradstreet Number	NA [ ]	0092568	19							

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TRI Reporting Form

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				TRI Facility ID Number			
	Ei	98055THBNG8THAN					
	PART II. CHEMICA	L - SPECIFIC	INFORMATION	Toxic Chemical, Category or Gene	eneric Name		
				Certain Glycol Ethers			
SECTION	1. TOXIC CHEMICAL IDENTITY	(1	mportant DO NOT complete this section if you completed	Section 2 below.)			
1.1	CAS Number (Important: Enter only one number exa	ctly as it appear	s on the Section 313 list. Enter category code if reporting a	a chemical category.)			
1.1	N230						
1.2	Toxic Chemical or Chemical Category Name (Import	ant: Enter only o	ne name exactly as it appears on the Section 313 list.)				
1.2	Certain Glycol Ethers						
1.3	Generic Chemical Name (Important: Complete only i	f Part I, Section	2.1 is checked "yes". Generic Name must be structurally c	descriptive).			
1.5	NA						
SECTION	2. MIXTURE COMPONENT IDENTITY (Important: D	O NOT complet	e this section if you completed Section 1 above.)				
0.4	Generic Chemical Name Provided by Supplier (Impo	rtant: Maximum	of 70 characters, including numbers, spaces, and punctua	ation.)			
2.1	NA						
	3. ACTIVITIES AND USES OF THE TOXIC CHEMIC :: Check all that apply.)	CAL AT THE FA	CILITY				
3.1	Manufacture the toxic chemical:	3.2	Process the toxic chemical:	3.3 Otherwise use the tox	ric chemical:		
*******************************	a. [ ] Produce b. [ ] Import						
c. d. e.	f produce or import:  c. [] For on-site use/processing  d. [] For sale/distribution  e. [] As a byproduct  f. [] As an impurity		[] As a reactant [] As a formulation component [] As an article component [] Repackaging [] As an impurity	a. [ ] As a chemical prod b. [ X ] As a manufactur c. [ X ] Ancillary or othe	ring aid		
SECTION	4. MAXIMUM AMOUNT OF THE TOXIC CHEMICAL	. ONSITE AT AN	IY TIME DURING THE CALENDAR YEAR				
4.1	[ 03 ] (Enter two-digit code from instruction package	e.)					
SECTION	5.QUANTITY OF THE TOXIC CHEMICAL ENTERIN	IG EACH ENVIR	ONMENTAL MEDIUM ONSITE				
***************************************			1 , ,	B. Basis of Estimate (enter code)	C. % From Stormwater		
5.1	Fugitive or non-point air emissions	NA [ ]	1925	C			
5.2	Stack or point air emissions NA []		1417	С			
5.3	Discharges to receiving streams or water bodies (enter one name per box)						
	Stream or Water Body Name						
1	-						

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5.3.1 NA

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\*For Dioxin and Dioxin-like Compounds, report in grams/year \*\*Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

RENTON

City

Page 3 of 5 TRI Facility ID Number 98055THBNG8THAN **EPA FORM R** PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED) Toxic Chemical, Category or Generic Name Certain Glycol Ethers SECTION 5. QUANTITY OF THE TOXIC CHEMICAL ENTERING EACH ENVIRONMENTAL MEDIUM ONSITE (Continued) A. Total Release (pounds/year\*) (enter range code\*\* or estimate) B. Basis of Estimate (enter code) NA Underground Injection onsite 5.4.1 [ X ] to Class I wells Underground Injection onsite 5.4.2 [ X ] to Class II-V wells 5.5 Disposal to land onsite RCRA subtitle C landfills 5.5.1.A [X] Other landfills 5.5.1.B [ X ] Land treatment/application 5.5.2 [ X ] farming RCRA Subtitle C 5.5.3A [ X ] surface impoundments Other surface impoundments 5.5.3B [ X ] 0 Other disposal 0 5.5.4 SECTION 6. TRANSFERS OF THE TOXIC CHEMICAL IN WASTES TO OFF-SITE LOCATIONS 6.1 DISCHARGES TO PUBLICLY OWNED TREATMENT WORKS (POTWs) 6.1.A Total Quantity Transferred to POTWs and Basis of Estimate 6.1.A.1 Total Transfers (pounds/year\*) 6.1.A.2 Basis of Estimate (enter range code\*\* or estimate) (enter code) 12240 C KING COUNTY DEPT OF NATURAL RESOURCES - EAST RECLAMATION 6.1.B. 1 **POTW Name** 1200 MONSTER ROAD SW POTW Address

King

County

\*For Dioxin and Dioxin-like Compounds, report in grams/year

98057

Zip

State

WA

TRI Reporting Form

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\*\*Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

										Page 4 of	5		
								TRI Fac	ility ID Number				
	EPA FORM R									98055THBNG8THAN			
	PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)							Toxic Chemical, Category or Generic Name					
								Certair	n Glycol Ethers				
SECTIO	ON 6.2 TRANSFERS TO OTHER OFF-SITE	OCATION	IS										
6.2.1 Of	ff-Site EPA Identification Number (RCRA ID I	No.)				ORD	089452353						
Off-	-Site Location Name					CHE	MICAL WAS	TE MAN	IAGEMENT OF T	HE NORTHWEST			
Off-	-Site Address					17629	9 CEDAR SP	RINGS	LANE				
City	ARLINGTON	State	OR	County	Gilliam			Zip	97812	Country (Non-US)			
	Is location under control of reporting facility	or parent o	company?					[] Yes [	X ] No				
	A. Total Transfers (pounds/year (enter range code** or estimate				sis of Estimate nter code)				C. Type of Waste Recycling/Energy F	of Waste Treatment/Disposal/ Energy Recovery (enter code)			
1.(	0			1 . C	1 . C 1 . M65		1 . M65						
6.2.2 Of	ff-Site EPA Identification Number (RCRA ID I	۱o.)				UTD9	81552177						
Off-	-Site Location Name					SAFE	ETY-KLEEN (	(ARAGO	ONITE), INC				
Off-	-Site Address					11600	0 NORTH AP	TUS RO	DAD				
City	ARAGONITE	State	UT	County	Tooele			Zip	84029	Country (Non-US)			
	Is location under control of reporting facility	or parent o	company?			[] Yes [ X ] No							
	A. Total Transfers (pounds/year (enter range code** or estimate			B. Basis of Estimate (enter code)				C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)					
1 . (	5			1 . C			1 . M50						
6.2.3 Of	ff-Site EPA Identification Number (RCRA ID I	۷o.)	***************************************			MOD	981127319						
Off-	-Site Location Name					LONE	E STAR INDU	JSTRIE:	S				
Off-	-Site Address		••••••			2524	SPRIGG ST	REET					
City	CAPE GIRARDEAU	State	МО	County	Cape Girardeau			Zip	63702	Country (Non-US)			
	Is location under control of reporting facility	or parent o	company?		000000000000000000000000000000000000000			[] Yes [	X ] No				
	A. Total Transfers (pounds/year (enter range code** or estimate	*) :)			sis of Estimate nter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)							
1 . 2	2			1 . C			1 . M56						
						4							

6.2.4 Off-Site EPA Identification Number (RCRA ID No.)							OHD980613541						
Off-Site Location Name								WASTE TECHNOLOGIES INDUSTRIES					
Off-Site Address							1250 ST C	GEORGE	STREE	T			
City	EAST LIVERPOOI	-	State	он	County	Columbiana	***************************************		Zip	43920	Country (Non-US)		
ls	s location under contro	ol of reporting facility	or parent o	company?					[] Yes [	X ] No			
		nsfers (pounds/year e code** or estimate				s of Estimate ter code)				C. Type of Waste Trea Recycling/Energy Reco			
1.3					1.C		1.	. M50					
6.2.5 Off-S	Site EPA Identification	Number (RCRA ID N	10.)				KSD03120	03318					
Off-Sit	te Location Name	***************************************					ASH GROVE CEMENT PLANT						
Off-Sit	te Address						1801 N. SANTA FE ST.						
City	CHANUTE		State	KS	County	Neosho			Zip	66720	Country (Non-US)		
ls	s location under contro	ol of reporting facility	or parent o	company?			[] Yes [ X ] No						
		nsfers (pounds/year e code** or estimate				s of Estimate ter code)	C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code)						
1.0	300 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	00110 00110 00110 00110 00110 00110 00110 00110 00110			1 . C	1 . M5			6				
SECTION	7A. ONSITE WASTE	TREATMENT METH	IODS AND	EFFICIEN	CY								
[] Not App	licable (NA) - Check h	ere if no on-site was	te treatme	nt is applied	d to any waste stream	containing the toxic	chemical or o	chemical	category.				
W	a. General /aste Stream enter code)		b. V		ment Method(s) Sequ -character code(s)]	ence				d. Waste T Efficie Estin	ency		
	7A. 1 a				7A. 1 b					7A.	1 d		
	W	1 : H071	2: H075	3: H121	4:H077 5:H123	6: H101 7: H083		E6					

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\*For Dioxin and Dioxin-like Compounds, report in grams/year
\*\*Range Codes: A=1-10 pounds; B=11-499 pounds; C=500-999 pounds.

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## EPA FORM R PART II. CHEMICAL - SPECIFIC INFORMATION (CONTINUED)

TRI Facility ID Number	
98055THBNG8THAN	ининалиналиналиналиналиналиналиналиналин
Toxic Chemical, Category or Generic Nam	e
Certain Glycol Ethers	

## SECTION 7B. ON-SITE ENERGY RECOVERY PROCESSES

[X] Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category.

Energy Recovery Methods [enter 3-character code(s)]

## SECTION 7C. ON-SITE RECYCLING PROCESSES

[ X ] Not Applicable (NA) - Check here if no on-site recycling is applied to any waste stream containing the toxic chemical or chemical category.

Recycling Methods [enter 3-character code(s)]

## SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES

		Column A Prior Year (pounds/year*)	Column B Current Reporting Year (pounds/year*)	Column C Following Year (pounds/year*)	Column D Second Following Year (pounds/year*)
8.1					
8.1a	Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	NA	NA	NA	NA
8.1b	Total other on-site disposal or other releases	3409	3342	3342	3342
8.1c	Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills	0	0	0	0
8.1d	Total other off-site disposal or other releases	o	0	0	0
8.2	Quantity used for energy recovery onsite	NA	NA	NA	NA
8.3	Quantity used for energy recovery offsite	2	2	2	2
8.4	Quantity recycled onsite	NA	NA	NA	NA
8.5	Quantity recycled offsite	NA	NA	NA	NA
8.6	Quantity treated onsite	NA	0	0	0
8.7	Quantity treated offsite	10621	12248	12248	12248

	The state of the s								
8.8	Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with production processes (pounds/year)		NA						
8.9	Production ratio or activity index		0.88	***************************************					
8.10	Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11.								
	Source Reduction Activities [enter code(s)]	Methods to Identify Activity (enter codes)							
8.10. 1	NA								
8.11	3.11 If you wish to submit additional optional information on source reduction, recycling, or pollution control activities, check "Yes."  Yes []								

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\*For Dioxin and Dioxin-like Compounds, report in grams/year

TRI Facility ID Number		naanaan maanaan aan maanaan aan aan maanaa	rannannaannannannannannannannannannannan	aan taan taan taan taan taan taan taan	
98055THBNG8THAN					
Toxic Chemical, Category or Generic Name					
Certain Glycol Ethers					

Additional optional information on source reduction, recycling, or pollution control activities.